Application or Docket Number											
PATENT APPLICATION FEE DETERMINATION RECORD (C) (1)											
Effective December 29, 1999											
١.	43	CLAIMS A	S FILED Column 1)	; ,	LL ENTITY	·	OTHER THAN				
FC	OR .		ER FILED	NUMBER	IMN 2) EXTRA	RAT	E FEE	OR <b>7</b>	SMALL RATE	FEE	
ВА	SIC FEE						345.00	OR		690.00	
тс	TAL CLAIMS	SI	ninus 🧷	20= * 30		X\$ 9		OR	X\$18=	51/2	
IND	DEPENDENT C	LAIMS	3 minus	3 = *	i i se j	X39		-	X78=	MO	
MULTIPLE DEPENDENT CLAIM PRESENT								OR		0100	
* If	the difference	in column 1 is	less than z	+130		OR	<u> </u>	WO			
* If the difference in column 1 is less than zero, enter "0" in column 2  TOTAL  OR TOTAL  OTHER THAN "											
		(Column 1)		OTHER THAN " ) SMALL ENTITY OR SMALL ENTITY							
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	· 5D	Minus	-20	30	X\$ 9		ОВ	∕/X\$18=	5400	
AME	Independent	. 3	Minus	- B		X39		OR	X78=	- 1/	
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130		OR	+260=	7600	
				TO	TAL	OR	TOTAL	1491			
:		(Column 1)		(Column 2)	(Column 3)	ADDIT. F	EEL	Jou.	ADDIT FEE	1,1 140	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	**	=	X\$ 9	=	OR	X\$18=		
	Independent	*	Minus	***	=	X39=	<u>.</u>	OR	X78=		
	TINS I PHESE	NIAHON OF M	ULMPLE DE	PENDENT CLAIM		+130		OR	+260=		
						TOT	AL	OR	TOTAL		
• . • .		(Column 1)		(Column 2)	(Column 3)	ADDIT. F	EE <b></b>	7.~	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE			RATE	ADDI- TIONAL	
	Total	*	Minus	**	=	X\$ 9=	FEE		X\$18=	FEE	
	Independent	*	Minus	***	=	X39=	2	OR			
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						N. C.	OR	X78=		
+130= +260= +130= +130= +130= +260=											
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE  ADDIT. FEE											
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 94411399

## Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	x	Fee	Fee	- T tal
	Sm./Lg.	• •			Sm. Entity	Lg. Entity	90 (AD
Basic Filing Fee	201/101	Ma	25		<u> </u>	167	540
Total Claims >20	203/103	-20	- 00	X	20	$\frac{1x}{7a}$	
Independent Claims >3	202/102	<u>9</u> -3		X	130	$\frac{I(0)}{2I(0)}$	2100
Mult. Dep Claim Present	204/104		•		100	130	- <u>120</u>
Surcharge	205/105				<u>(0)</u>	1.50	- 100
English Translation	139						WO.

## TOTAL FEE CALCULATION

Fees due upon filing the application:

Office of Initial Patent Examination